## WASHINGTON BOROUGH RECREATION DEPARTMENT **2014 SWIMMING LESSON APPLICATION**

Please Check the Appropriate Session(s):	Session 1: July	y 7 <sup>th</sup> – July 18 <sup>th</sup>	
	• 9:30-10:0	·	
	• 10:05-10	):35 am	
	• 10:40-11		
	<ul><li>9:30-10:0</li><li>10:05-10</li><li>10:40-11</li></ul>	2:35 am :10 am gust 4 <sup>th</sup> – August 15 <sup>th</sup> 00 am 2:35 am :10 am	
	• 7:35-8:05	1	
		ion for session 3 only)	
	d at the Recreation	on Department's discr <u>JGH OF WASHINGTON</u>	
Registration Information Parent/Guardian Name:		Phone:	
Address:	City:	State:	_ Zip:
Email Address:	Cell Phone:		
	Explanation of Lev	<u>vels</u>	
Mommy & Me (Age 4 and Under)		······································	
A low profile activity where parent joins their characters.	niid under the supervis	sion of an instructor for a wal	ter acclamation activi

ty

### Level 1 – Water Introduction ( $2^{1/2}$ - 5 years old)

May or may not have ever been in the water before and are unable to swim. Need assistance in water that is over their heads. May be afraid of the water. Instructors will teach them how to maneuver through the water and how to put their head under water as well as their entire body.

#### **Level 2 – Primary Skills (4 - 6 years old)**

Basic swimming ability. Children have gone through a water introduction course. They are comfortable in water that they can stand in. They are comfortable being without their parents and around other children. They will be taught to use a kickboard and proper kick, how to use the wall and to use a proper free style stroke, and how to float and glide through the water.

### **Level 3 – Stroke Refinement (5 - 7 years old)**

Students have successfully passed Levels 1 and 2 and can demonstrate basic floating techniques and principles behind the free style stroke. They may not be able to perform these tasks well, but they can demonstrate knowledge of them. They will be taught the free style stroke, back stroke and beginnings of the breast stroke.

Level 4 – Stroke Development (6 - 8 years old) – Efficiency of strokes, flip & open turns, diving

Level 5 - Pre-Swim Team Clinic (9 years old & up) - Breakout, starts, turns, drills, interval training

If children cannot perform these tasks, the instructor can and will move them to a lower class.

List Children Taking Lessons				
* * * * * * * * * * * * * * * * * * * *	******	* * * * * * * *	******	* * *
1 <sup>st</sup> Child's Name:			Age:	
Please Circle the Following:				
Has your child had previous lessons?	Yes	No		
Rate your child's swim skills	Weak	Good	Strong	
Circle appropriate level	Mommy & Me		Level 2	
	Level 3	Level 4	Level 5	
* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * *	* * * * * * * *	*******	***
2nd Child's Name:			Age:	
Please Circle the Following:				
Has your child had previous lessons?	Yes	No		
Rate your child's swim skills	Weak	Good	Strong	
Circle appropriate level	Mommy & Me Level 3	Level 1 Level 4		
*******				***
3rd Child's Name:			Age:	
Please Circle the Following:				
Has your child had previous lessons?	Yes	No		
Rate your child's swim skills	Weak	Good	Strong	
Circle appropriate level	Mommy & Me	Level 1	Level 2	
	Level 3	Level 4	Level 5	
* * * * * * * * * * * * * * * * * * * *				* * *
Do you have any special concerns?				
Any health problems that the instructors shou	ald be aware of?			

# Washington Borough Recreation Parent Consent to use of Child's Images on the Washington Borough Website

From time to time, the Recreation Program records digital images of players participating in youth sports activities sponsored by the Borough to document the activities that are offered to Borough youth through the Recreation Program. The Borough desires to post these images on its website to promote the Recreation Program and its activities to the community.

It is the Borough's intent to protect the privacy rights of our young players and their families by (1) prohibiting the posting of any young player's image or identifying information on its website without the express written permission of the player's parent(s); and (2) publishing young players' photos on the website only as a means of promoting the activities of the Recreation Program.

In furtherance of the Borough's goal of protecting the privacy rights of our young players and their families *no identifying* information (name, age, etc.) will be included with any child's picture.

Consent to use of child's Image on Washington Borough Web	Site, Please check one box
□□Yes, the undersigned parent or legal guardian of the posting of digital images of the player on the Washington E activities conducted by the Borough Recreation Program.	(player's name), agrees and consents to orough website that were taken in connection with programs or
The undersigned retains the right to refuse the posting of any removal of any image at any time by contacting:	
□□No, the undersigned parent or legal guardian of	(player's name), DOES NOT consent to the rough website that were taken in connection with programs or
Signature of Both Parents or Legal Guardians	Date
Printed name of Parents or Legal Guardians	

#### Liability waiver and emergency medical authorization

I understand that the activities/programs held within the Borough of Washington Municipal Park may include physical activity and exercise with the possibility of physical contact and bodily injury to myself or my children or ward (if any) listed above, and that the Washington Borough Recreation Department and its staff and the Borough of Washington (the "Borough"), are not undertaking responsibility to oversee activities that are free from the risk of injury, loss or damage to person or property, and I hereby assume all of said risks for myself and my children.

In consideration of the use and availability of the services and facilities, by me and the above listed children and wards if any, I hereby agree to release, relieve, hold harmless, and indemnify the Washington Borough Recreation Department, the Borough, and their respective officers, agents, instructors, and employees from all liability and claims arising out of any accident or injury suffered or incurred by me or said children or wards while enrolled in any class or program sponsored, organized or supervised by the Washington Borough Recreation Department or the Borough, except for acts of gross negligence or intentional acts of the said officers, agents, instructors, and employees.

Further, in case of accident, injury or sudden illness, I authorize any first-aid or emergency medical care which may become necessary for my child, ward or myself while enrolled in any activity or program administered by the Borough. I also authorize that my child, ward or I may be transported to a local medical facility. If I cannot be reached in an emergency, I hereby grant permission for my child or ward named above to receive all appropriate medical treatment necessary. By executing this document, I hereby assume, on behalf of my child or ward, all risk of injury or loss to which he or she may be exposed.

Signature of Parent	or Guardian		Date
Fee paid:	Check #:	Received by:	Date:
Washington Re	orough Recreation Den	partment	

Washington Borough Recreation Department 100 Belvidere Avenue; Washington, NJ 07882

Please contact the Recreation secretary with any questions you may have: 908-689-3600 x136 or visit www.Washingtonboro-nj.org for more information